

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Chan Ho Kyung

Serial No: 10/552,484

Filed: October 6, 2005

For: METHOD OF GENERATING PLCM FOR
BROADCAST/MULTICAST SERVICES AND APPARATUS
THEREOF

Art Unit: 2617

Examiner: Balaoing, Ariel A.

Conf. No.: 2358

Mail Stop AF
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an AMENDMENT in the above-identified application.

A petition for extension of time for ___ month(s) is enclosed.
 A Request for Continued Examination is enclosed.
 No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	46	-	86	**	0 LG=\$52 SM=\$26	\$ 0
INDEPENDENT CLAIMS FEE	12	-	18	***	0 LG=\$220 SM=\$110	\$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS				LARGE ENTITY FEE = \$390 SMALL ENTITY FEE = \$195		\$ 0
						TOTAL \$ 0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 502290:

Excess claim(s) fee in the amount of \$ ____.
 RCE fee in the amount of \$ ____.
 Extension fees in the amount of \$ ____.
 Petition fee in the amount of \$ ____.
 Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
 Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,
 Lee, Hong, Degerman, Kang & Waimey

Date: August 6, 2010

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